

# **STANDARD SHOULDER ARTHROGRAM**

**FLUORO KVP – 70**

**DIGITAL FLUORO WITH PATIENT INFORMATION TYPED IN**

**PATIENT POSITION FOR FLUORO – SUPINE**

**CONTRAST SUPPLIES: 50mL OMNIPAQUE 300, ARTHROGRAM TRAY, STERILE GLOVES, 1% LYDOCAINE, SPINAL NEEDLES (20G AND 22G), ALCOHOL PREPS, LEAD GLOVES, MASKS, APRONS, AND EXTENSION TUBING.**

## **GENERAL DESCRIPTION OF PROCEDURE AFTER SET-UP IS COMPLETE**

- No routine preliminary films are required.
- If preliminary films are required, the procedure for a routine shoulder should be followed.
- The radiologist will scrub the injection site with Betadine solution.
- The technologist should assist the radiologist in drawing up the xylocaine, Lidocaine, and/or Omnipaque.
- The radiologist will drape the area and make the injections.
- Following the injection of contrast, the radiologist will fluoroscope the patient's shoulder.
- Following the completion of fluoroscopy, the radiologist will instruct the technologist to exercise the patient's shoulder and perform overhead radiographs if necessary.

## **SHOULDER ARTHROGRAM**

**EXTERNAL ROTATION (AP) SHOULDER:**

10 x 12	CROSSWISE
BUCKY	SUSPENDED RESPIRATION
44"	

**PATIENT POSITION:** Externally rotate hand and arm to place the humerus in a true AP position.

**CENTRAL RAY:** Directed perpendicular to the coracoid process.

**COLLIMATION:** None.

**SHIELDING:** Gonads on **ALL** patients.

### **INTERNAL ROTATION (LATERAL) SHOULDER:**

10 x 12                      CROSSWISE  
BUCKY                      SUSPENDED RESPIRATION  
44"

PATIENT POSITION: Internally rotate hand and arm and place the back of the hand on the patient's hip.

CENTRAL RAY: Directed perpendicular to the coracoid process.

COLLIMATION: None.

SHIELDING: Gonads on **ALL** patients.

### **INFEROSUPERIOR AXIAL SHOULDER:**

10 x 12                      CROSSWISE  
TABLETOP                      SUSPENDED RESPIRATION  
44"

PATIENT POSITION: With the patient supine, abduct the arms as much as possible. Have the patient turn their head away from the affected side and place the cassette above the shoulder.

CENTRAL RAY: Directed horizontally through the axillary region to the glenohumeral articulation.

COLLIMATION: Collimate to the skin surface.

SHIELDING: Gonads on **ALL** patients.

## **MRI SHOULDER ARTHROGRAM**

**FLUORO KVP – 70**

**DIGITAL FLUORO WITH PATIENT INFORMATION TYPED IN**

**PATIENT POSITION FOR FLUORO – SUPINE**

**CONTRAST SUPPLIES: 50mL OMNIPAQUE 300, 250 mL 0.9% SODIUM CHLORIDE, 2 mL GADILINIUM, ARTHROGRAM TRAY, STERILE GLOVES, 1% LYDOCAINE, SPINAL NEEDLES (20G AND 22G), ALCOHOL PREPS, MASKS, LEAD GLOVES AND APRONS, EXTENSION TUBING.**

**GENERAL DESCRIPTION OF PROCEDURE AFTER SET-UP IS  
COMPLETE**

- No routine preliminary films are.
- If preliminary films are required, the procedure for a routine shoulder should be followed.
- The technologist will inject 2 mL of gadolinium into the 250 mL 0.9% sodium chloride.
- The radiologist will scrub the injection site with Betadine solution.
- The technologist should assist the radiologist in drawing up the xylocaine, Lidocaine, and Omnipaque and the gadolinium mixture.
- The radiologist will drape the area and make the injections.
- Following the injection of contrast, the radiologist will fluoroscope and image the patient's shoulder.
- The patient will be immediately escorted to the MRI department.

## **CT SHOULDER ARTHROGRAM**

**FLUORO KVP – 70**

**DIGITAL FLUORO WITH PATIENT INFORMATION TYPED IN**

**PATIENT POSITION FOR FLUORO – SUPINE**

**CONTRAST SUPPLIES: 50mL OMNIPAQUE 300, ARTHROGRAM TRAY, STERILE GLOVES, 1% LYDOCAINE, SPINAL NEEDLES (20G AND 22G), ALCOHOL PREPS, MASKS, LEAD GLOVES AND APRONS, EXTENSION TUBING.**

### **GENERAL DESCRIPTION OF PROCEDURE AFTER SET-UP IS COMPLETE**

- No routine preliminary films are required.
- If preliminary films are required, the procedure for a routine shoulder should be followed.
- The radiologist will scrub the injection site with Betadine solution.
- The technologist should assist the radiologist in drawing up the xylocaine, Lidocaine, and/or Omnipaque. The mixture to use is 10mL lidocaine and 10mL omnipaque.
- The radiologist will drape the area and make the injections.
- Following the injection of contrast, the radiologist will fluoroscope and image the patient's shoulder.
- The patient will be immediately escorted to the CT department.